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Editorial

Nurse Education Today: Special issue on compassionate care

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This special issue of Nurse Education Today will add to the body of knowledge on compassion in healthcare: how employers can foster it and how educational establishments can develop it through pre-course selection of students, classroom and practice learning, and post-registration courses. In response to the call for papers for a Special Issue on Compassionate Care, the Editors received a number of articles from across the world that investigated and/or explored the evidence around this controversial and complex topic. Papers were selected where they added or refuted evidence particularly around the measurement and impact of compassionate care, and where educational initiatives were evaluated and/or tested, and where there was exploration of emotional labour (Hochschild, 1983 and Smith, 2012) and cultures of care. The Special Issue provides qualitative and quantitative studies, evaluation methods.

Evidence from previous literature has indicated the culture across whole organisations has a significant influence on the provision of compassionate care by front-line staff. Leaders play an essential role in creating that culture. Evidence from the Leadership in Compassionate Care Programme (LCCP) (Edinburgh Napier University and NHS Lothian, 2012) identifies six key themes that organisations must pay attention to in order to provide compassionate care: 1. Caring conversations; 2. Flexible person-centred risk taking; 3. Feedback; 4. Knowing me, knowing you; 5. Involving, valuing and transparency; 6. Creating spaces that work. The essential leadership skills that are required throughout the organisation to do this required further robust evidence. The papers by Stephen Smith et al. (2014) and Dewar and Cook (2014) show the importance of this programme in connecting education, research and organisational change to support the diverse dimensions of compassionate care. This may mean creating a 'restorative space' for nurse lecturers or developing leaders within communities of practice and action learning sets to increase self-awareness and participants' abilities to think and reflect in different ways to promote compassionate and respectful conversations in the work place. Both Smith et al. (2014) and Dewar and Cook (2014) demonstrate new approaches to learning and the creation of a positive learning environment that supports lecturers and practitioners to promote compassion and support students. Goodman (2014) places the compassionate care debate within a wider socio-political context highlighting the nursing care experiences of older people and the need for management practices that enable practitioners to go beyond the rhetoric of governance, risk and rationality to control caring practices.

The Point of Care programme at the King's Fund has raised the profile of compassionate care by researching the nature of the hard work involved and the need to support frontline practitioners to remain engaged and prevent burnout. The innovative Schwartz Rounds which originated in the USA have been introduced by the Point of Care programme to a number of UK hospitals and early evaluation suggests they are making a very real difference to patients and staff. Given the potential of Schwartz Rounds to play an important part in promoting compassionate care the editors invited Joanna Goodrich of the Point of Care programme to reflect on their role in supporting and benefiting staff. The programme has recently become an

independent charity, The Point of Care Foundation and the Schwartz Rounds look set to become an integral feature of many health care organisations to enable staff to learn and care.

There has been a rise in policies and public opinion on the importance of recruiting students with the 'right' values to pre-registration programmes and other roles within the NHS in the UK (NHS Employers, 2014). For example, the National Values Based Recruitment programme is a key deliverable for Health Education England (HEE), and aims to ensure that selection into all new NHS-funded training posts incorporates testing of values based recruitment by March 2015. We were pleased therefore to receive a number of articles exploring the values associated with the selection of students into nursing programmes. Universities, often in partnership with service providers are trying to build the evidence base around values based recruitment. Within this Special Issue, Waugh et al. (2014a) explore the results of an online survey of registered and student nurses and midwives on the desirability of several personal attributes and key skills, and builds on previous knowledge in values based recruitment. Pitt et al. (2014) use a personal qualities assessment (PQA) tool to explore student nurses' personal qualities on entry to and at the end of their programme. Personal qualities remained consistent throughout the three years demonstrating the importance of a tool to assess these qualities from the outset. Significant gender and age differences were found with women appearing to be more empathetic and community orientated. Older students demonstrated higher measures of self-control and resilience. These studies demonstrate the importance of recruiting students with personal qualities required to become a registered nurse and the provision of a programme which recognizes and sustains these qualities while catering for differences in students' gender and age.

The Special Issue also addresses a study exploring the understanding of compassion. In a fairly large survey of students and qualified staff, Bray et al. (2014) found was a high level of consensus in understanding compassion in some aspects. However, as with previous evidence, gaps remain in the the current understanding of the role of education in fostering compassionate practice.

Can compassionate care be taught? The evidence remains equivocal (Edinburgh Napier University and NHS Lothian, 2012, Ballat and Campling, 2011, Gilbert, 2010 and Chochinov, 2007). But the Francis report (Francis, 2013) suggests "that the current university-based model of training does not focus enough on the impact of culture and caring" (p. 1513, 23.48) and recommends "an increased focus in nurse training, education and professional development on practical requirements of delivering compassionate care in addition to the theory" (p. 1513, 23.49).

In this Special Issue, we address Francis' recommendation, by featuring a number of articles on innovative educational interventions, and associated evaluation of those, including the development of humanistic attributes through the use of puppets in simulation (McAllister et al., 2014), and the exploration of students' and lecturers' perceptions of the Personal Development Tutor (Ross et al., 2014) in an area where emotional labour is well documented. Ensuring that education provides an appropriate and effective means of developing self-compassion and compassion when caring for others is essential, and de Souza (2014) provides an innovative approach using a sculpting exercise to engage students and raise awareness of the complicated nature of people's social networks, and through attitudinal learning help them provide compassionate care that integrates family support. In developing self-compassion, Clarke (2014) describes a person-centred enquiry into reflection and reflective practice that suggests a model for reflection that could be used and tested further. Smith et al. (2014), using a participatory action research approach, describes the findings from a project with lecturers using 'restorative space', a methodology that could be used and tested further, whilst Waugh (2014b) used Action Learning Sets to further develop students' ability to create therapeutic relationships in mental health nursing. Fawcett and Rhynas (2014) use the concept of human

factors to address the challenges of incorporating care that is both safe and personalised in teaching students the essentials of compassionate care. Adam and Taylor (2014) explore the development of student nurses' compassionate skills and their experiences of complex issues in clinical practice, and describe a variety of tools available to students and tutors.

There is increasing international focus on compassionate care within health service delivery (Shaller, 2007). For example, a study with GPs in France has shown that satisfactory working conditions can support the maintenance of clinical empathy (Lelorian et al., 2012). The European Association for Communication in Healthcare emphasises the significance of communication and is aimed at "... establishing best practices and improving education to comply with the changing needs of health delivery which emphasise a patient centred approach, shared responsibility and decision making" (European Association for Communication in Healthcare, 2013). Similarly in Finland, a key aim of national health strategy (Kaste Programme 2012–2015) is to improve equality, client-oriented services and client centred care (Ministry of Social Affairs and Health Finland, 2012). In Ireland, Prendergast (2012) has developed a practice-based intervention entitled; "A compassion footprint for healthcare" in response to the direct focus on efficiencies within healthcare provision. The International Council of Nursing's Code of Ethics (2012) states that within the four principal elements, two of them, nursing and people, affirm that the nurse should be able to demonstrate professional values such as compassion. The UK's healthcare policy and practice have been actively influenced by national strategy in this area as seen in the new visions for NHS nursing care (Commissioning Boards Chief Nursing Officer and DH Chief Nursing Advisor, 2012 and NHS Scotland, 2010).

As a result of these and other key policy and practice influences across the world, the Editors received work relating to the theoretical and practice-based influences on the development and assessment of students in nursing programmes and in specific clinical contexts. The article by Msiska et al. (2014) exploring the learning trajectory of student nurses caring for patients with HIV and AIDS in Malawi demonstrates the learner journey and ultimately the provision of compassionate care engaging emotional labour against a range of odds including limited resources and personnel. Van der Cingel writing from the Netherlands focuses on compassion and the complex part it plays in promoting positive relationships between nurses and older people with chronic illness. She proposes that compassion may be the (missing) link which connects scientifically sound evidence and intuitive knowing through the nurse–patient relationship to ensure professional nursing care.

In seeking papers for this Special Issue our aim was to show that compassionate care lies at the heart of quality patient care and is fundamental to the delivery of a safe, effective health service. The authors consider a range of contexts and methods which demonstrate the complexity of compassion and its application to education, research and innovation. They also show the importance of leadership in promoting learning and caring cultures and the preparation of the next generation of nurses for the post-Francis era.

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